PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09706431

. CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPEO			OTHER THAN R SMALL ENTITY	
TOTAL CLAIMS								RATE	FEE		RATE	FEE
FOR			NUMBER I	FILED	NUME	BER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			l min	us 20=	*	0		X\$ 9=		OR	X\$18=	:
INDEPENDENT CLAIMS			/ minus 3 =		*	0		X40=		OR	X80=	
MULTIPLE DEPENDENT CLAIM PRESENT								+135=	***	OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in colu						column 2	,	TOTAL	·	OR	TOTAL	710-00
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							<u> </u>	SMALL E	ENTITY	OR	OTHER SMALL I	
AMENDMENTA		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	* 6	Minus	**	<u> </u>	=	↓	X\$ 9=		OR	X\$18=	
	Independent	TATION OF M	Minus	***	CLAIM	= \	┨╏	X40=	•	OR	X80=	
-	TINOTTRESE	INTATION OF MIC	DETIF EL DEF	LINDEIN	CLAIIV	, []		+135=		OR	+270=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu		(Column 3)						
ENT'B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT-B	Total	.12	Minus	** 6	20	= _]	X\$ 9=		OR	X\$18=	
	Independent FIRST PRESE	★ 3 NTATION OF MU	Minus	*** ¿	3. CCLAIM		┦ [X40=		OR	X80=	
				<u> </u>	02,		_	+135=		OR	+270=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
U		(Column 1)		(Colu		(Column 3)	<u>)</u>					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	· 17	Minus	** 〕	<u>(</u> 0	=~-		X\$ 9=		OR	X\$18=	
	Independent	TATION OF MI	Minus	***	S CLAIM	= 9		X40=	378	OR	X80=	
	I INST PRESE	NIATION OF MI	JEI IPLE DEF	CINDEN	CLAIN	·	┙╽	+135=	~ / ~	OR	+270=	:
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."							TOTAL	375	ΛP	TOTAL	
***	If the "Highest Nu	mber Previously Pa ber Previously Pa	aid For" IN THI	S SPACE	is less th	an 3, enter "3."		ADDIT. FEE	ropriate box	l	ADDIT. FEE lumn 1.	